

General Rules

Effective July 1, 2010

Medical Fee Schedule

important, particularly as to whether the patient is medically capable of returning to work in some capacity.

Return to work decisions should be based on objective findings, and the physician's return to work assessment should identify, if possible, any alternative duty employment to which the patient may return if return to full duty is not medically advisable.

X. SELECTION OF PROVIDERS

The selection of appropriate providers for diagnostic testing or analysis, including but not limited to CAT scans, MRI, x-ray, and laboratory, shall be at the direction of the treating or prescribing physician. In the absence of specific direction from the treating or prescribing physician, the selection shall be made by the payer, in consultation with the treating or prescribing physician.

Physical or occupational therapy, including work hardening, functional capacity evaluations, back schools, chronic pain programs, or massage therapy shall be provided upon referral from a physician. In the absence of specific direction from the treating or prescribing physician, the selection of a provider for these services shall be made by the payer in consultation with the treating or prescribing physician.

The selection of providers for the purchase or rental of durable medical equipment shall be at the direction of the payer.

The selection of providers for medical treatment or service, other than as above provided, shall be in accordance with the provisions of MCA section 71-3-15 (Rev. 2000).

XI. DRUG SCREENING

Only one (1) drug screen or drug test result shall be eligible for reimbursement for each drug test conducted on the same patient on the same day, except and unless the initial screening results are deemed by the prescribing provider to be inconsistent or inherently unreliable. In that event, a confirmation screening may be ordered by the prescribing provider and paid for by the payer. In addition, treatment may not be discontinued based on the results of a drug test absent a confirmation test, which shall be reimbursed in addition to the initial screening test. Merely duplicate screenings or tests which are rerun to confirm initial results are not otherwise eligible for reimbursement.

XII. MILEAGE REIMBURSEMENT

The payer shall reimburse each claimant for all travel to obtain medical treatment which is being obtained under the provisions of the Mississippi Workers' Compensation Law, including travel to a pharmacy to obtain medication or supplies necessary for treatment of a compensable injury, regardless of the number of miles traveled. Reimbursement shall be made for each mile of round trip travel necessitated by the compensable injury, at the rate adopted by the Commission and in effect at the time of the travel. Only reasonable and necessary miles traveled are subject to reimbursement.

Exhibit
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